



Why Librarians Matter in the Promotion of Mental Health Literacy in Higher Education

Dr. Philip Kwaku Kankam¹, Frank Darkwa Baffour², ¹Department of Information Studies, University of Ghana., ²College of Arts, Society and Education, James Cook University.

All over the world, mental health problems have been found to affect persons and institutions negatively. It has contributed to poor academic performance, education dropout rates and poor output in higher educational institutions. In order to develop suitable interventions on mental health for use in higher education settings, it is important to promote and strengthen the Mental Health Literacy (MHL) of staff and students. Particularly, tertiary students and staff need to acquire relevant knowledge so they can act and deal with mental health problems. This study investigated how well librarians could be, or are, positioned to promote and strengthen MHL in higher education. Using relevant keywords and search strategies, 46 articles were retrieved from two databases (LISTA and PubMed). The literature analysis was fused into a narrative review report based on themes. The study reveals that librarians are perfectly positioned to promote and strengthen MHL in higher education with their skills and expertise to serve as keepers of mental health information; facilitators of mental health information literacy; and liaisons to students and staff who strive to improve their MHL. The study recommends the need for stakeholders to observe and develop continuing interest of MHL within librarianship.

Key words: *Health literacy, Higher education, Librarians, Mental health, Mental health literacy, Promotion.*

INTRODUCTION

The World Health Organisation (WHO) estimates that at least one out of four persons globally experience a mental health disorder at some point in time during their lifetime (WHO, 2018). Particularly, mental illness has been found to be one of the five major diseases that leads to disability and has also been found to account for over 30% of all disabilities in a lifetime



(Sayarifard & Ghadirian, 2013). This clearly depicts that mental illness is a subject of great concern to every person, institution and country (Ganasen et al., 2008; Vigo et. al., 2016).

Currently, the scale of mental disarrays is a growing public health concern and one of the remedies for dealing with public health anxiety is found to be health literacy (Anker et al., 2011; WHO, 2013; Vigo et al., 2016). Nutbeam et al. (1993) define health literacy as the ability and capacity to get access to, understand, and use information in a manner that promotes and maintains good health. A subset of health literacy is Mental Health Literacy (MHL) that looks into “knowledge and beliefs about mental disorders which aid their recognition, management or prevention” (Jorm et al., 1997, p. 182).

Mental health literacy is known to power the public’s decision-making on their mental health, especially in dealing with the public’s low rates of help-seeking for psychiatric disorders (Venkataraman et al., 2019, p. 2727). Within the body of literature available, educational institutions have been found to provide a unique opening towards the improvement of mental health literacy that facilitates the identification, prevention and treatment of mental health problems among the youth (Rones & Hoagwood, 2004; Ovuga et al., 2006; Hunt & Eisenberg, 2010). It is important to note that mental health disorders are found to mostly affect people from their youth especially during the periods that they are in school (Kessler et al, 2007). Hence, the need for MHL promotion in higher education and other educational institutions is crucial.

NEED FOR THE STUDY

The need for the promotion of MHL in higher education cannot be overemphasised. As maintained by Nsereko and Basa (2017, p.1), mental health literacy “is at centre stage as the foundation stone to realise these existential concerns” of mental disorders. The promotion of MHL in higher education concerns all stakeholders in higher education and a cursory look at the components of MHL clearly shows that almost all of them are linked to information and knowledge management (Jorm, 1997). A number of barriers identified on promotion of MHL point to lack of information and general awareness on mental disorders and there is therefore “the need for greater quality control of information sources to ensure that the public gets quality information” on mental health (Jorm, 2000, p. 398).

Significantly, it has been found that majority of patients, including students, rely on the internet for health and mental health information (WHO, 2004; Hunt & Eisenberg, 2010; WHO, 2013). However, a number of studies have raised concerns about the quality of mental health information available online. For example, a study by Griffiths and Christensen (2000) audited the top 21 websites on mental disorder and found the general quality of information available on the websites to be poor. They concluded that the current “popular criteria for evaluating the quality of websites were not indicators of content quality” (p. 1515). A more recent study by



Aref-Adib et al (2016) highlights the need for partnership approach towards online mental health information seeking due to content quality. The study further calls on mental health clinicians to encourage “patients to discuss information they have found online as part of a shared decision-making process” (p. 232). These present a need to ensure that accurate and quality mental health information are available for the promotion of MHL. Librarians are major stakeholders in higher education, and they are known to have expertise in information and knowledge management. It is therefore of essence to look into how well they could use their expertise to assist in the promotion of MHL in higher education.

METHODOLOGY

Through the use of relevant keywords (‘mental health’ ‘mental health literacy’ ‘mental health information’ mental health information behaviour’ ‘belief on mental health’ ‘library and mental health’ ‘librarian and mental health’ ‘mental health help-seeking, etc.) and search strategies (both Boolean and truncation), 46 studies were found to be suitable for inclusion in the study. The literature analysis was fused into a narrative review report based on themes.

Eligibility criteria

For an article to be included, the article had to be indexed in the document sources. The document sources for the study were LISTA and PubMed databases and the inclusion criteria were based on studies that focused on the mental health and mental health literacy of students, faculty and other stakeholders of higher education; papers that were written in English; and papers published between the years 2000 and 2019. Other literature on mental health literacy (e.g. Jorm, 1997, WHO, IFLA guidelines) as well as librarians’ expertise and roles were purposively gathered.

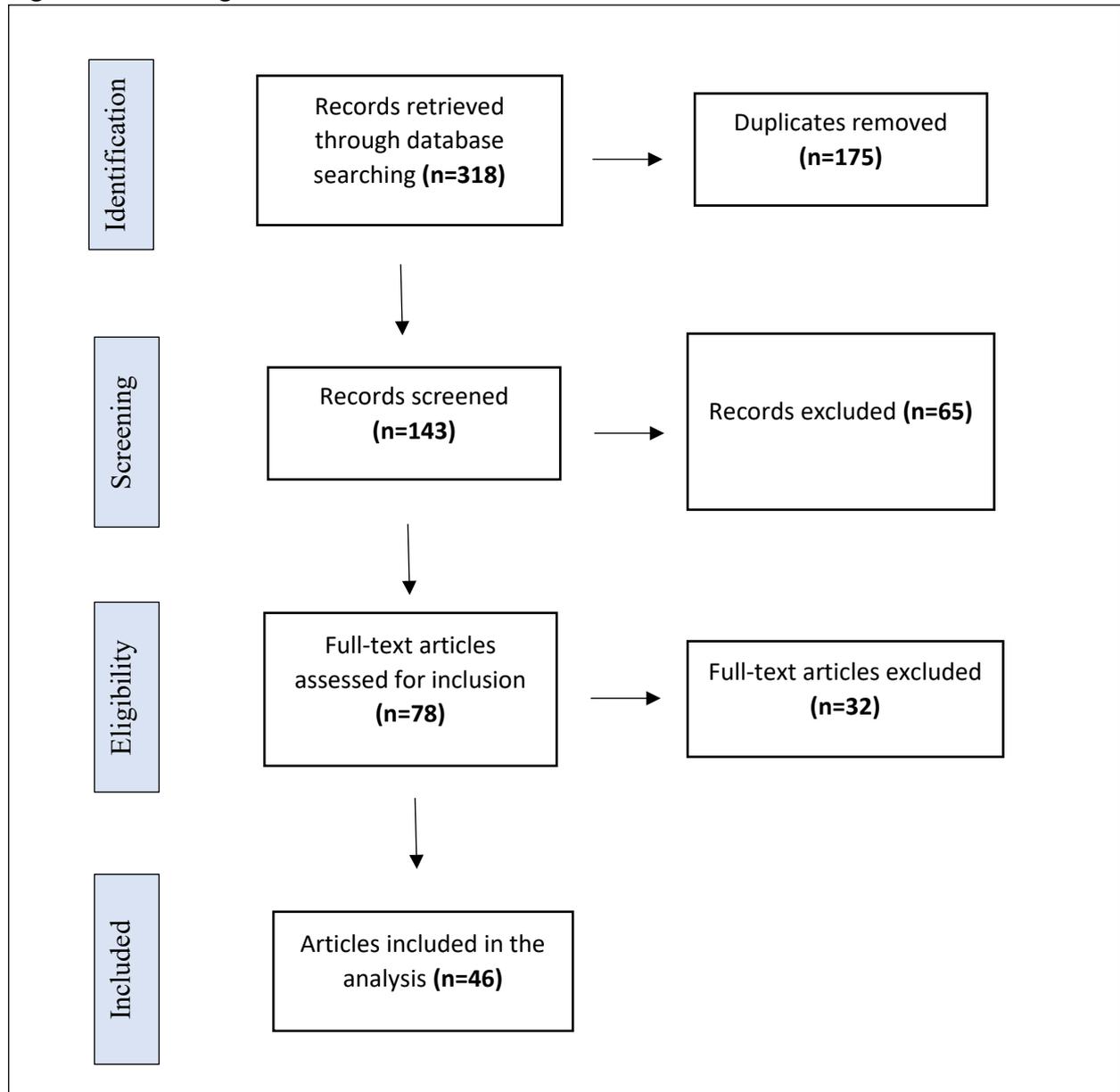
Identification and selection

A bibliographic search was conducted in the two databases and the same search strategy based on keywords in title and abstract was used in both databases. The search strategy was limited to retrieve abstracts of articles published between January 1, 2000 and July 31, 2019 in scholarly journals (search filters were available both in LISA and PubMed databases for this purpose).

All the bibliographic records including author names, title, source, year, abstract, and keywords that were retrieved were imported into an EndNote X7 library, where duplicates were removed through the use of the Bramer method (Bramer et. al., 2016). The eligibility criteria was then employed for the screening of each record and assignment of independently eligibility codes. Upon agreement on potentially relevant records by the authors, the corresponding full-text publications were sought. Records were excluded when both authors agreed that they were not

relevant. Articles that were not agreed upon for exclusion at this stage were included for full-text screening. After full text screening, only articles that satisfied eligibility criteria were included for the analysis (Figure 1).

Figure 1: Flow diagram



Data extraction and synthesis

A data extraction form consisting of nine (9) questions or themes was created (Table 1). The data extraction form was based mainly on the concept of mental health literacy, mental health literacy promotion, mental health information behaviour, libraries/librarians and mental health literacy. Four articles were used as a testing sample for the data extraction form and this led to the form's revision as well as the coding manual's refinement.

Data extraction was followed by a descriptive analysis.

Table 1: Coding scheme for included articles

Questions	Response options (number of articles)
Does the article conceptualise mental health literacy?	<ul style="list-style-type: none"> • Yes (42) • No (4)
Does the article outline components of mental health literacy?	<ul style="list-style-type: none"> • Yes (36) <ul style="list-style-type: none"> ○ Based on Jorm et. al. (1997) ○ Other (comment) • No (10)
Is there a description of mental health information behaviour?	<ul style="list-style-type: none"> • Mental health information need (28) • Mental health information sources (37) • Mental health information retrieval (25) • Mental health information evaluation (27) • Other (8)
Is there a bibliographic reference for mental health literacy?	<ul style="list-style-type: none"> • Yes (40) • No (6)
Is the overall mental health literacy concept discussed in terms of the priority of higher education?	<ul style="list-style-type: none"> • Yes (33) • No (13)
Are methods for the promotion of mental health literacy described?	<ul style="list-style-type: none"> • Promotion among students (29) • Promotion among faculty (17) • Promotion among staff (8) • Other (2)
Is there a description of the justification for employing a method for mental health promotion?	<ul style="list-style-type: none"> • Yes (32) • No (14)
Is there a description of any insights on libraries' interventions on mental health literacy?	<ul style="list-style-type: none"> • Yes (11) • No (35)



Is there a description of librarians' role and expertise on mental health literacy promotion?	<ul style="list-style-type: none">• Yes (17)• No (29)
---	--

THE CONCEPT OF MENTAL HEALTH LITERACY

Mental health literacy (MHL) needs to be understood in the context of a concept that has resulted from the sphere of health literacy (Ganasean et al., 2008). It is important to appreciate that health literacy is a major significant component of health's social determinants. The WHO regard health literacy as "a stronger predictor of an individual's health status than income, employment status, education and racial or ethnic group" (WHO, 2013, p. 7).

According to the U.S. Department of Health and Human Services (2000), health literacy is the degree to which persons have the ability and capacity to obtain, process, and understand fundamental health information and services that are needed to make appropriate health choices or decisions. The importance of health literacy therefore stems from the fact that it empowers persons to find, understand and employ health information and services for healthy living. It has been found that all persons rely on health literacy at some point in their life including well educated persons who also face issues in health literacy (Zarcadoolas et al., 2005; Oakie, 2017).

The term mental health literacy was introduced by the Australian researcher Anthony F. Jorm and his colleagues in 1997 as an extension to the domain of health literacy. It is understood that Jorm et al. coined the term "Mental Health Literacy" with the purpose of drawing researchers and the world's attention to a neglected field of research and action (Yu et al., 2015; Dias et al., 2018). The term as coined by them places MHL as a subset of health literacy that concerns and looks into "the knowledge and beliefs about mental disorders that can aid their recognition, management, and prevention" (Jorm et al, 1997, p.183).

A broader definition of MHL as opined by Yu et al. (2015) includes individuals' knowledge to maintain and improve good mental health as well as their knowledge on mental disorders and their treatments. Moreover, the concept of MHL needs to be understood to include the ability and capacity to provide support for someone who experiences mental disorder (Dias, et al., 2018). This brings to light the fact that MHL influences other features of mental health help-seeking process which includes attitudes toward mental health patients and practitioners as well as choices and compliance with mental health treatment (Venkataraman et al., 2019, p. 2727).

COMPONENTS OF MENTAL HEALTH LITERACY

The concept of mental health literacy has several components including the ability to recognise specific disorders or different types of psychological distress; knowledge and beliefs about risk factors and causes; knowledge and beliefs about self-help interventions; knowledge on



professional help available; attitudes which facilitate recognition and appropriate help-seeking; and knowledge of how to seek mental health information (Jorm, 2000, p. 396). Jorm et al.'s (1997) initial definition of MHL comprised seven components with knowledge on risk factors and knowledge on causes of mental health literacy separated.

According to Yu et al. (2015), these seven components could be classified into three main classes of recognition: knowledge of factors related to mental health, attitudes towards mental disorders and beliefs about mental disorders. The components of MHL as outlined by Jorm (2000) are noted to be “comprehensive and inclusive of the essential factors that would determine mental health care” (Venkataraman et al., 2019, p. 2725).

MHL AND HIGHER EDUCATION

Mental health is an important and integral part of health as it is found to improve the competencies of students, workers and communities, thereby enabling them to achieve their self-determined goals (WHO, 2004). Within the higher education environment, students are recognised to be the long-term client-base that need consistent and effective support to ensure ongoing satisfaction (van der Velden, 2012). These supports must also concern their mental health. The reason lies in the fact that mental disorders have been found to have first onset on persons before age 24 in 75% of mental health cases, thus, the age at which more than 50% of young people are in higher education is considered the age of peak onset for mental health problems (Kessler et al, 2007).

Particularly, mental health challenges have been shown to affect academic performance as well as higher education dropout rates of students (Andrews & Wilding, 2004). This attests to the fact that untreated mental health disorders are strong determinants of poor academic achievements (Wei et al., 2015). However, a number of students living with mental disorders are found neither willing to disclose their situation nor seek help due to lack of widespread education, as well as all-encompassing social and structural stigma (Andrade et al., 2014; Moll et al., 2018). Moreover, faculty and staff within higher education who lack adequate mental health literacy are also challenged in how to respond to students' and colleagues' mental disorders (Rones & Hoagwood, 2004; Hunt & Eisenberg, 2010).

In order to support those experiencing mental disorders and those working to maintain their mental health, education efforts need to be embarked on rigorously across social systems and within the higher education environment (Stone, 2008). Evidence abounds that workplace mental health education results in increase knowledge and help-seeking behaviour, and also leads to reduced stigma and perceived stress (Czabała et al., 2011; Moll et al., 2018; Oakie, 2017). These evidences focus on the benefits of MHL promotion on student mental health and thus place faculty and staff in a uniquely identified position to support the early identification of mental health problems among students (Kutcher et al., 2013).



Literature shows that MHL in tertiary institutions is widely recognised as a foundational element of mental health promotion and this results in the prevention, early identification, and treatment of mental disorders (Kutcher et al., 2013; McLuckie et al., 2014). Moreover, improved mental health literacy in tertiary institutions tend to improve the use of mental health services available thereby leading to better outcomes in higher education (Wei et al., 2015). Certainly, poor MHL remains an urgent health concern in tertiary education since it has been shown to influence the students and staff's decision-making in relation to their mental health, especially their low rates of help-seeking for psychiatric symptoms (Hunt & Eisenberg, 2010, Moll et al., 2018).

LIBRARIANS AND MENTAL HEALTH PROMOTION

Long before the concepts of 'health literacy' and 'mental health literacy' were coined and employed, librarians were known to actively answer consumer health questions and also promote health education among students and other information seekers (Whitney et al., 2017). Mental health service provision, including service utilisation and supervision, are noted to hinge on "mental health literacy in the effort to promote mental health wellbeing of an individual or a given community" (Nsereko & Basa, 2017, p.1). Within the higher education setup, MHL promotion is shown to lead to greater emphasis on increasing staff and students' "knowledge and skills about mental health and on empowering the person experiencing disabling symptoms" (Jorm, 2000, p. 396).

Librarians have been involved in the promotion of health literacy since its beginning through research and teaching, as well as programmatic and campaign efforts (Larsen, 2015). Mental health literacy as outlined by Jorm et al. (1997) has seven components and a critical appraisal of these components shows that six out of the seven components are directly linked to information and knowledge management. This clearly positions librarians perfectly to contribute to the mental health literacy promotion due to their recognised roles within higher education as keepers of information, facilitators and advocates of information literacy, as well as liaisons to researchers and healthcare professionals who strive to improve health literacy (IFLA, 2008; Hester & Stevens-Ratchford, 2009; Lukenbill & Immroth, 2009; Whitney et al., 2017; Ottosen et al, 2019).

Providing and facilitating access to accurate mental health information

A major aspect of MHL promotion in higher education is 'information campaign' through educational materials to improve MHL of students and staff (Jorm, 2000, p. 399). The promotion campaigns are geared toward the provision of accurate MHL to the constituents. These campaigns are in support of the International Federation of Library Associations and Institutions (IFLA) statutes that prescribe "the belief that people, communities and organisations need universal and equitable access to information, ideas and works of



imagination for their social, educational, cultural, democratic and economic wellbeing” (IFLA, 2008, p. 2).

In this case, constituents of higher education require accurate and equitable access to mental health information for the mental wellbeing of themselves and others (Stone, 2008). It is important to appreciate that information turns into knowledge when human beings form justified and true beliefs about the world. Hence, without accurate and equitable provision and access to mental health information, knowledge and beliefs of mental health as outlined in the components would not be achieved.

Clearly, access to quality mental health information and material is a prerequisite to the promotion of mental health literacy in higher education and librarians are well positioned to lead in this regard (IFLA, 2008). Within the higher education setup, librarians possess the right expertise to perform valuable services to students and staff (including mental health practitioners) by facilitating fast and easy access to mental health information (IFLA, 2010).

Organising mental health information

At the moment, there are significant volumes of health (including mental health) information and records that are produced via research and practice yearly. For example, mental health information abounds via the internet, and with the abundance of this information many people, especially students, are “facing information overload, which requires adapting to and processing of never-ending streams of new information” (Ottosen et al. 2019, p. 210). In order to access mental health information in a timely and easy manner within higher education institutions, the librarians have to organise the available information as well as acquire it for users such as students and staff (Ilogho et al., 2020, p. 10). This places librarians at an advantage as partners in helping to organise, select and identify best ways of communicating complex scientific information on mental health at a level which students and other consumers would be able to appreciate.

For the promotion of MHL in higher education, librarians know how to reach students and staff with the right kind of information and the right language to use. Thus, they are well positioned and can partner with higher education mental health teams to “help formulate better approaches to converting complex scientific information to lay language, can help redesign patient-centered pamphlets or informational videos, design instructional approaches” towards MHL promotion (Ottosen et al., 2019, p. 213).

Improving users’ mental health information retrieval competencies

A number of studies on the concept of mental health literacy have shown that adequate mental health literacy is associated with information-seeking behaviour (Noroozi et al., 2018; Dias et al., 2018; Yu et al., 2015; Nutbeam et al., 1993). The majority of health information materials,



both printed and electronic, require relatively high literacy skills for access and use regardless of their topic (Reavley & Jorm, 2011; Alghamdi, 2012). However, these skills may not exist among some of their target group of people (Gal & Prigat, 2005). For example, studies on health information behaviour have concluded that many students lack the needed skills to access and retrieve relevant health information from the internet (Bose et al., 2016; Aref-Adib et al., 2016; Femi & Oyinade, 2017).

Librarians' intervention in this regard within the higher education setup is crucial. Here, librarians' expertise is needed since they are known to have the skills in applying criteria to information searches, selecting superior information content and offering instructional services to users on how to assess credible and quality health information (Ilogho, et al., 2020).

Assisting persons with special needs

Libraries of all types contribute in countless ways to the quality of life of persons since they serve as a welcoming place for the benefit of all persons thereby making “them a natural location for people to connect and seek answers and assistance to help function in society” (Ottofen et al., 2019, p. 209). Significantly, libraries in institutions of higher education serve as a welcoming environment for students with special needs. Librarians have the expertise to assist and make information resources available to these students that will help towards their academic success and wellbeing.

Students and staff with language, speech, hearing, visual and intellectual disabilities are found to encounter greater difficulties when they need to apply high levels of health information literacy skills (Hester & Stevens-Ratchford, 2009). However, libraries have dedicated sections and well-trained librarians to meet the mental health information needs of these persons with special needs. For example, most braille facilities in higher education for visually impaired students are located in institutional libraries and are managed by trained librarians. This underscores the important roles librarians could play in the promotion of MHL to cover all members of higher education by making mental health information available to persons with special needs as well.

Expertise in dissemination of information

Again, librarians are well positioned to assist students and staff in higher education to meet their mental health information needs (Whiteman et al., 2018). Their expertise in the use of Current Awareness Service (CAS) and Selective Dissemination of Information (SDI) are great tools to enable them to play significant roles in the promotion of MHL. Librarians can employ CAS for the creation of awareness on MHL in higher education by drawing the attention of staff and students to quality and timely mental health information and resources. They could also employ the SDI to search “out the profile of people, identify their specific information



needs and carefully select relevant [mental health] information to disseminate to them (Ilogho et al., 2020, p. 11).

Treating mental health disorders through the use of bibliotherapy

Interestingly, the role of librarians in MHL is not limited to awareness creation and prevention but treatment as well. The idea of treating and healing persons through books and literature is traced back to libraries in Ancient Greece. It is established that Ancient Greek librarians were prescribing books in support of the healing and treatment of soldiers during and after the first and second World Wars (Springer, 2017). This presents a connection between libraries and psychotherapy and it is termed as bibliotherapy. Bibliotherapy is a therapy that employs books and cognitive-behavioural therapy principles (Hanson, 2018). As opined by Larsen (2015):

Bibliotherapy represents a context where the reciprocal interaction between reader and literature sets focus on the reader's personality so that literature becomes a tool for the therapist. Put in simpler terms: bibliotherapy is treatment through books, and arises in the interaction between the participant, the therapist and the literature. (p. 2)

Librarians, through bibliotherapy, could assist in the treatment of mental health disorders by prescribing self-help books to staff and students in higher education. It has been found that the employment of bibliotherapy increases mindfulness as well as quality of life since it is potent in the treatment of moderate and mild depression symptoms, stress and anxiety (Hanson, 2018). Importantly, the use of bibliotherapy for mental treatment applies not only to those diagnosed with mental disorders, but anybody that requires an emotional pick-me-up, change in attitude, or anyone in need of help to understand and deal with difficult issues (Gualano et al., 2017).

CONCLUSION

The significance of libraries in higher education goes beyond the provision of a storage area for information. Significantly, libraries and librarians are available to provide numerous supports to the students and staff in higher education. Librarians are well placed, due to their expertise, to have a significant impact on the promotion of mental health literacy and health information fluency (Mani, 2004). An important role of librarians in the promotion of mental health literacy involves the provision of quality and timely mental health information to students, faculty and staff to aid in their understanding, and achievement, of better mental health outcomes.

Currently, the advancement in technology and vast production of online information have compelled persons, including students, to shift from being passive recipients of health information to active consumers of health information (McMullan, 2006). It is therefore important for librarians in higher education to draw the attention of students, staff and healthcare providers to the need for them to rely on accurate, timely and relevant mental health



information. This attests to the fact that librarians have an important role to play in assisting students and staff in locating mental health information; assisting them on how to critically evaluate the mental health information and sources to ensure quality; and providing general support for mental health literacy in higher education. Thus, librarians are perfectly positioned to promote and strengthen MHL in higher education with their skills and expertise to serve as keepers of mental health information; facilitators of the mental health information literacy; and liaisons to students and staff who strive to improve their MHL.

To be successful, librarians need to learn and understand the history of mental health literacy research, especially earlier efforts that have been implemented in mental health literacy programs in tertiary institutions and libraries. This shows that librarians can help in the promotion of MHL in higher education if they possess the required expertise through training and support (Lukenbill & Immroth, 2009). It is therefore important for information professionals and other stakeholders to observe and develop continuing interest of MHL within librarianship.



REFERENCES

- Alghamdi, K. M. & Moussa, N. A. (2012). Internet use by the public to search for health-related information. *International Journal of Medical Informatics*, 81(6), 363-373.
- Andrade, L. H., Alonso, J., Mneimneh, Z., Wells, J. E., Al-Hamzawi, A., Borges, G., ... Kessler, R. C. (2014). Barriers to mental health treatment: Results from the WHO World Mental Health surveys. *Psychological Medicine*, 44(6), 1303-1317.
- Andrews, B. & Wilding, J. M. (2004). The relation of depression and anxiety to life-stress and achievement in students. *British Journal of Psychology*, 95, 509–21.
- Anker, A. E., Reinhart, A. M. and Feeley, T. H. (2011). Health information seeking: A review of measures and methods. *Patient Education and Counseling*, 82(3), 346-354.
- Aref-Adib et al. (2016). A qualitative study of online mental health information seeking behaviour by those with psychosis. *BMC Psychiatry*, 16, 232-237.
- Bose, R., Sivaprakash, & Nandi, P. (2016) *A cross-sectional study of mental health literacy of undergraduate college students*. Puducherry: Sri balaji Vidyapeeth.
- Bramer, W. M., Giustini, D., de Jonge, G. B., Holland, L., & Bekhuis, T. (2016). De-duplication of database search results for systematic reviews in EndNote. *Journal of the Medical Library Association: JMLA*, 104(3), 240
- Cullen, R. (2005). Empowering patients through health information literacy training. *Library Review*, 54(4), 231-244.
- Czabała, C., Charzyńska, K., & Mroziak, B. (2011). Psychosocial interventions in workplace mental health promotion: An overview. *Health Promotion International*. <http://doi.org/10.1093/heapro/dar050>
- Dias, P., Campos, L., Almeida, H., & Palha F. (2018). Mental health literacy in young adults: Adaptation and psychometric properties of the mental health literacy questionnaire. *International Journal of Environmental Research and Public Health*, 15, 1318.
- Femi, A. & Oyinade, T. (2017). Health care information literacy the role of librarians. *International Journal of Advanced Scientific Research and Development*, 4(3), 114-121.
- Gal, I., & Prigat, A., (2005). Why organisations continue to create patient information leaflets with readability and usability problems: An exploratory study. *Health Education Research*, 20(4), 485-493.



- Ganasen, K. A., Parker, S., Hugo, C. J., Stein, D. J., Emsley, R. A. & Seedat, S. (2008). Mental health literacy: Focus on developing countries. *African Journal of Psychiatry*, 11(1), 23-8.
- Griffiths, K. M. & Christensen, H. (2000). Quality of web based information on treatment of depression: Cross sectional survey. *BMJ*, 321, 1511-1515.
- Gualano, M. R., Bert, F., Martorana, M., Voglino, G., Andriolo, V., Thomas, C., Gramaglia, R., Zeppegno, P., & Siliquini, R. (2017). The long-term effects of depression treatment: Systematic review of randomized clinical trials. *Clinical Psychology*, 58, 49-58.
- Hanson, K. (2018). Positive psychology for overcoming symptom of depression: A pilot study exploring the efficacy of positive psychology self-help book versus a cbt self-help book. <https://www.ncbi.nlm.nih.gov/pubmed/29692281>
- Hester, E. J., & Stevens-Ratchford, R., (2009). Health literacy and the role of the speech language pathologist. *American Journal of Speech-Language Pathology*, 18, 180-191.
- Hunt, J., & Eisenberg, D. (2010). Mental health problems and help-seeking behavior among college students. *Journal of Adolescent Health*, 46(1), 3-10.
- IFLA's guidelines on information literacy for lifelong learning (2010). <http://www.ifla.org/files/assets/information-literacy/publications/ifla-guidelines-en.pdf>
- Ilogho, J. E., Alao, A., Adekeye, O., Gesinde, Abiodun P., Adeusi, S., Agoha, B., Idiegbeyanose, J., Ifijeh, G., Osayande, O., & Izuagbe, R. (2020). The role of librarians in health information provision for depression reduction. *Library Philosophy and Practice* (e-journal). <https://digitalcommons.unl.edu/libphilprac/3565>
- International Federation of Library Associations and Institutions. (2008). IFLA statutes. <http://www.ifla.org/files/assets/hq/ifla-statutes-en.pdf>
- Jorm, A. (2000). Mental health literacy: Public knowledge and beliefs about mental disorders. *British Journal of Psychiatry*, 177(5), 396-401.
- Jorm, A. F., Korten, A. E., Jacomb, P. A., Christensen, H., Rodgers, B., & Pollitt, P. (1997). Mental health literacy: A survey of the public's ability to recognise mental disorders and their beliefs about the effectiveness of treatment. *Medical Journal of Australia*, 166(4), 182-186.



- Kessler, R. C., et al. (2007). Lifetime prevalence and age-of-onset distributions of mental disorders in the World Health Organization's world mental health survey initiative. *World Psychiatry*, 6, 168-176.
- Kutcher, S., Wei, Y., McLuckie, A., & Bullock, L. (2013). Educator mental health literacy: A programme evaluation of the teacher training education on the mental health & high school curriculum guide. *Advances in School Mental Health Promotion*, 6(2), 83-93.
- Larsen, E. B. (2015). Stronger mental health for children and adolescents in the library. <http://creativecommons.org/licenses/by/3.0/>
- Lukenbill, B., & Immroth, B. (2009). School and public youth librarians as health information gatekeepers: Research from the Lower Rio Grande Valley of Texas. *School Library Media Research*, 12, 1-30.
- Mani, N. S. (2004). From information literacy to information fluency. *American Libraries*, 35(2), 30.
- McLuckie, A., Kutcher, S., Wei, Y., & Weaver, C. (2014). Sustained improvements in students' mental health literacy with use of a mental health curriculum in Canadian schools. *BMC Psychiatry*, 14(3), 1-6. <http://doi.org/10.1186/s12888-014-0379-4>
- McMullan, M. (2006). Patients using the internet to obtain health information: How this affects the patient-health professional relationship. *Patient Education and Counseling*, 63(1/2), 24-28.
- Moll, S., VandenBussche, J., Brooks, K., Kirsh, B., Stuart, H., Patten, S., & MacDermid, J. (2018). Workplace mental health training in health care: Key ingredients of implementation. *The Canadian Journal of Psychiatry*. <http://doi.org/10.1177/0706743718762100>
- Nsereko, N. D., & Basa, V. (2017). Promoting campus mental health literacy. *Mental Health and Human Resilience International Journal*, 1(1), 1-5.
- Nutbeam, D., Wise, M., Bauman, A., Harris, E., & Leeder, S. (1993). Goals and targets for Australia's health in the year 2000 and beyond. <https://trove.nla.gov.au/version/39872272>
- Oakie, T. (2017). Validating the co-worker mental health awareness training program. http://proquest.umi.com.library2.smu.ca/xmlui/bitstream/handle/01/27132/Oakie_Taylor_MASTERS_2017.pdf?sequence=1&isAllowed=y



- Ottosen, T., Mani, N. S., & Fratta, M. N. (2019). Health information literacy awareness and capacity building: Present and future. *International Federation of Library Associations and Institutions*, 45(3), 207-215.
- Ovuga, E., Boardman, J., & Wasserman, D. (2006). Undergraduate student mental health at Makerere University, Uganda. *World Psychiatry*, 5(1), 51-52.
- Reavley, N. J., & Jorm, A. F. (2011). The quality of mental disorder information websites: A review. *Patient Education and Counseling*, 85(2), 16-25.
- Rones, M., & Hoagwood, K. (2004). School-based mental health services: A research review. *Clinical Child and Family Psychology Review*, 3(4), 223-241.
- Sayarifard, A., & Ghadirian, L. (2013). Mental health literacy in Iran: An urgent need for a remedy. *International Journal of Preventive Medicine*, 4(7), 741-742.
- Springer. (2017). Bibliotherapy as a method of treatment. www.springer.com/cda/content/document/cda
- Stone, G. (2008). Mental health policy in higher education. *The Counseling Psychologist* 36(3), 490-498.
- U.S. Department of Health and Human Services. (2000). *Healthy people 2020*. Washington, DC: U.S. Government Printing Office.
- van der Velden, G. (2012). Institutional level student engagement and organisational cultures. *Higher Education Quarterly*, 66(3), 227–247.
- Venkataraman, S., Partil, R., & Balasundaram, S. (2019). Why mental health literacy still matters: A review. *International Journal of Community Medicine and Public Health*. 6(6), 2723-2729.
- Vigo, D., Thornicroft, G., & Atun, R. (2016). Estimating the true global burden of mental illness. *The Lancet Psychiatry*, 3(2),171-178.
- Wei, Y., McGrath, P. J., Hayden, J., & Kutcher, S. (2015). Mental health literacy measures evaluating knowledge, attitudes and help-seeking: a scoping review. *BMC Psychiatry*,15, 291.
- Whiteman, E. D. et al. (2018). Public libraries as partners for health. *Preventing Chronic Disease*, 15.



- Whitney, W., Keselman, A., & Humphreys, B. (2017). Libraries and librarians: Key partners for progress in health literacy research and practice. *Information Services & Use*, 37(1), 85-100.
- World Health Organization (WHO). (2016). Preventing depression in the WHO European Region.
http://www.euro.who.int/_data/assets/pdf_file/0003/325947/NewPreventingdepression.pdf
- World Health Organization (WHO). (2013). *Health literacy: The solid facts*. Geneva (CH): WHO Regional Office for Europe.
- World Health Organization (WHO). (2018). *Mental disorders* <http://www.who.int/news-room/fact-sheets/detail/mental-disorders>.
- World Health Organization (WHO). (2004). *Promoting Mental Health*.
<http://public.eblib.com/choice/publicfullrecord.aspx?p=4978588>
- Yu, Y., Liu, Z., Hu, M., Liu, X., Liu, H., Yang, J. P., Zhou, L., & Xiao, S. (2015). Assessment of mental health literacy using a multifaceted measure among a Chinese rural population. *BMJ Open*. <https://doi.org/10.1136/bmjopen-2015-009054>
- Zarcadoolas, C., Pleasant, A., & Greer, D. S. (2005). Understanding health literacy: An expanded model. *Health Promotion International*, 20(2), 195-203.